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DATE SENT: September 6, 2005

SUBJECT: Authorization to Act in a Representative Capacity

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Sample Form (09-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Ziva SOMMER					
Application No. 09/910,870					
Filed: July 24, 2001					
Title: USING MULTIPLE DOCUMENTS TO IMPROVE OCR ACCURACY					
Attorney Docket No. SOMMER=2	Art Unit: 2625				
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1"> <thead> <tr> <th>Name</th> <th>Registration Number</th> </tr> </thead> <tbody> <tr> <td>Daniel Kligler</td> <td>41120</td> </tr> </tbody> </table>		Name	Registration Number	Daniel Kligler	41120
Name	Registration Number				
Daniel Kligler	41120				
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>					
SIGNATURE of Practitioner of Record					
Signature	<i>Ronni S. Jillions</i>				
Date	September 6, 2005				
Name	Ronni S. Jillions				
Registration No., if applicable	31,979				
Telephone	202-628-5197				

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